

Prescribed by Secretary of State 3/05

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Full Name of Committee					ាសបុក	Regist(a	ion Num	Pef. 4 PA	9N'S	
Citizens for Tavare	5									
Full Name of Candidate										
Charleta B. Tavares	•									
Street Address	Street Address Office Sought					District				
1237 Medford Rd.				City Cot	ıncil					
City					St	ate	Zıp Cod	e		
Columbus					OH		432	09		
									Annual	Year
Mpodfkeput	Pre-Primary	Post-Primary	Pre-C	General		Post-Ger	neral		200)9
the Muchelelone me	July	August	Septe	ember					Semian	nual
37 (3)	Monthly	Monthly	Mon	thly		Termina	hon			
Amended Report?	Report Elec	tronically filed?			М]	D Y		
☐ Yes ☑ No		Yes No	Decomposition	C)	1	1	0	6	0	7

For candidates only, during an election year if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517 10(H) for details

il. Amountbergie de word from bestrepart	\$ 7,599.81
2. Totalmore hy continuous (from Roun No. 21-A)	0.00
3. Total other tranno (From Form No. 31-A-2)	0.00
4 Total finds available (sum offices 1, 2, 3)	\$ 7,599.81
5. Rollmorelmy experimes (From Rom Mo. 21-11)	\$ 2,857.28
4. Extens under 1 (fine 4 minus line 5)	\$ 4,742.53
7. Velge of helind contributions received (From Form No. 21-8-11)	\$
S. Value of helical contabulars mode (Rom Form No. 21-1-2)	\$
2. Outstarting local cover by committee (Nove Poure No. 1149)	\$
10. Outperfing delte oxed by committee (Grow Form No. 2044)	\$ 5,079.96
ll. Creeningbons wedto committe (Amp Famille, N43)	\$
12. Velvoofindeparlanterparituusuusile (From Form No. 31-49)	\$
18. Northermic Aing Entites only Sum of the 32, 7 and amount of any new torus resolved this period	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE PETTH DEGREE COMMITS ELECTION FALSIFICATION. WHOEVER Robert Chilton, Dep. Treas.

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Contribution

pages

Other

pages

1

Total

pages

3

	1	
Page	1	
		_

Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Commutee						- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10			
Citizens for Tavares									
To Whom Owed				Prior Ar	nount		Amt Incurred this Period		
McTigue Law Group					5,07	79.96	0.00		
Address				Item or F	Outstanding Balance				
550 East Walnut St.				Leg	al Ser	vices	5,079.96		
City Columbus	State O H	Zıp Cod	e 215		Ande This Period Amount				
Pola Polarina de Indiana	M	D	Y	М	D	Y	s		
Date Debt was in greatly beautral	0 7	1 2	0 8		1		0.00		
Registration Number, if PAC				М	D	Y			
				M	D	Y			
To Whom Owed				Prior Ar	nount	<u> </u>	Amt Incurred this Period		
							,		
Address					Purpose fo	r Debt	Outstanding Balance		
City		Zip Cod	e		Made This Period Amount				
Date Delitivesk originally Introduct	M	D	Y	М	D	Y	S		
Registration Number, if PAC		4.,	 	M	D	Y			
				М	D	Y			
To Whom Owed				Prior Ai	mount		Amt Incurred this Period		
ess				Item or Purpose for Debt Outstanding Balance					
City	State	Z ър Сос	le	Payments Made This Period Date Amount					
Date Deby was originally incurred	M !	D	Y	M	D	Y	S		
Registration Number, if PAC	•			М	D	Ý			
				М	D	Y			
							<u> </u>		

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column Transfer total of all payments made this period to the Statement of Expenditures (Form No 31-B) Total amount forgiven should be included in the In-Kind Contributions Received (Form No 31-J-1) Transfer total outstanding debt amount to the cover page

Total Payments this Period \$	0.00	(also record on Form 31-B
Total Outstanding Balance \$	5,079.96	(also record on cover page